

"I had an interview with the Board of Guardians of St. James's parish, on the evening of Thursday, 7th September, and represented the above circumstances to them. In consequence of what I said, the handle of the pump was removed on the following day."

John Snow, 1855

February 2004 Topics

- Highly Pathogenic Avian Influenza (H5N2) in Texas
- DREAMS for North Dakota
- Prevnar[®] Shortage
- Flu Vaccine 2004/2005



Highly Pathogenic Avian Influenza (H5N2) in Texas

In February 2004, Texas reported an outbreak of highly pathogenic avian influenza (H5N2) in a poultry farm located in the south-central region of the state. No human cases have been reported. Outbreaks of avian influenza occur among poultry flocks in the United States periodically, such as the H7N2 outbreaks in Delaware and Maryland this year. Such outbreaks normally do not spread to humans, but precautions taken to ensure such an event does not happen include culling of affected poultry, instituting quarantine measures and implementing statewide bans on the sale of live poultry from affected states.

The H5N2 strain of avian influenza in Texas is different from the H5N1 strain of highly pathogenic avian influenza currently spreading through poultry farms and causing human cases in Asia. Humans are believed to potentially be susceptible to highly pathogenic strains of avian influenza, and careful hygiene precautions should be followed if exposed to live poultry affected by the disease.

The Centers for Disease Control and Prevention (CDC) and United States Department of Agriculture (USDA) have issued guidance to reduce risk in workers involved in culling and disinfecting the affected poultry farm and live bird markets quarantined due to the outbreak in Texas. These guidelines and more information about avian influenza can be viewed at www.cdc.gov/flu/avian/protectionguid.htm.

Avian influenza (H5N1) has been reported in chickens and ducks in several Asian countries since December 2003. As of March 5, 2004, Vietnam and Thailand have reported a total of 33 human cases, of which 22 have died. The CDC and World Health Organization have not issued travel advisories to the affected countries in Asia but do recommend evaluating patients with severe respiratory illness and travel history to H5N1 affected areas fewer than 10 days from onset of symptoms. Information about travel precautions for travel to countries reporting H5N1 can be viewed at www.cdc.gov/travel/other/precautions avian flu 020604.htm.



DREAMS for North Dakota

The North Dakota Department of Health Division of Disease Control is developing and The North Dakota Department of Health Division of Disease Control is developing and Monitoring implementing the Disease Reporting, Epidemiological Assessment and Monitoring System, also known as DREAMS. The DREAMS project will enhance disease surveillance programs by providing real-time reporting of conditions, more efficient case management and increased data applications.

Phase I of the DREAMS project includes a web-based disease reporting system for providers and integration with the Division of Microbiology to receive laboratory reports electronically. Phase I is expected to be functional by April 2004. Phase II will involve integrating with private laboratories in Bismarck, Jamestown, Fargo, Grand Forks, Devils Lake, Minot, Williston and Dickinson. Other enhancements, such as geographic mapping functions, also will be included. The Phase II project is expected to be completed by June 2004.

Health-care providers and facilities will be able to report cases, produce reports and review laboratory results for samples submitted to the Division of Microbiology by that facility.

Several other data sources currently are being integrated with the DREAMS project including animal-health disease and laboratory reporting, emergency response/ambulance runs and syndromic surveillance.



Prevnar® Shortage

To further conserve vaccine, CDC – in consultation with the American Academy of Family Physicians, the American Academy of Pediatrics and the Advisory Committee on Immunization Practices – recommends that all health-care providers **temporarily** suspend routine use of both the third and fourth doses of the pneumococcal (PCV7) vaccine Prevnar[®], effective immediately.

This action was taken to minimize the likelihood of shortages until Wyeth Vaccines is able to restore production capacity. Since the recommendation was issued, PCV7 production has been much less than had been expected and shipments have been delayed, resulting in shortages of vaccine. Widespread shortages may continue beyond this summer. It is critical that all providers immediately follow this recommendation, regardless of their current vaccine supply. Children at increase risk of severe disease should continue to receive the routine, four-dose series. The following conditions are considered medically high-risk for pneumococcal disease:

- Cochlear implants
- Chronic medical conditions

- Solid organ transplants
- Sickle cell disease
- Anatomic asplenia
- Cerebrospinal fluid leak
- Immunocompromising conditions

On March 5, 2004, the CDC published an MMWR article describing the revised recommendation. This recommendation reflects CDC's assessment of the existing national PCV7 supply and may be changed if the supply changes. Updated information about the national PCV7 supply is available at www.cdc.gov/nip/news/shortages/default.htm.



Flu Vaccine 2004/2005

The World Health Organization announced in February 2004 the composition of the influenza vaccine for the 2004/2005 season. The vaccine for the Northern Hemisphere will contain:

- An A/New Caledonia/20/99(H1N1)-like virus.
- An A/Fujian/411/2002(H3N2)-like virus.
- A B/Shanghai/361/202-like virus.

The Type A Fujian-like and Type B Shanhai-like viruses in the vaccine differ from the vaccine components used in the previous two years.

Contributing authors of The Pump Handle include Erin Fox, Molly Sander, Julie Goplin, Tracy Miller, Kirby Kruger and Larry Shireley. For questions, suggestions or inquiries, or to be removed from the mailing list, please contact Julie Goplin of the Division of Disease Control at 701.238.2375 or by email at jgoplin@state.nd.us.

The pump handle picture in the title was obtained from the website www.ph.ucla.edu/epi/snow.html.



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